	100		PTO/SB/21 (09-04	ット		
/0	40	Application Number	10/665,917			
· .	TRANSMITTAL	Filing Date	September 17, 2003 KATAOKA, KOUJI			
SE	P 1 1 2006 μ/ FORM	First Named Inventor				
1	£ /.	Art Unit	2652			
188	Per be used for all correspondence after initial filing)	Examiner Name	Craig A. Renner			
,	Total Number of Pages in This Submission 19	Attorney Docket Number	16869G-086500US			

ENCLOSURES (Check all that apply)								
Fee Trans	mittal Form	Annotated, Replaceme Sheet of Drawings	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences					
F	ee Attached	Licensing-related Pape						
Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks The Commissioner is authorized.		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): Return Postcard zed to charge any additional fees to Deposit				
Reply to Missing Parts under 37 CFR 1.52 or 1.53								
	SIGNA	ATURE OF APPLICANT, A	TTORNEY, C	OR AGEN	Τ			
Firm Name	Townsend and Town	send and Crew LLP						
Signature		fol						
Printed name	Chun-Pok Leung							
Date September 6, 2006			Reg. No.	41,405				
CERTIFICATE OF TRANSMISSION/MAILING								
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment , Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Signature								
Typed or printed	name ov Salvador				Date	September 6, 2006		

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PTO/SB/17 (01-06)

Fees pursuant to the Con	Complete if Known							
\`A\		Application Number 10/665		5,917				
FEE	₹ L	Filing Date September 17, 2		2003				
Fo	First Named Inver	ntor KATA	KATAOKA, KOUJI					
Applicant claims sm	Examiner Name Cra		Craig A. Renner					
	Art Unit 2652							
TOTAL AMOUNT OF	PAYMENT (\$) 200.00		Attorney Docket No. 16869		G-086500	US		
METHOD OF PAYM	ENT (check all that apply)							
Check Cree	dit Card Money Order	None	e 🔲 Other (plea	se identify):				
Deposit Account	t Deposit Account Number: 20-1	1430	Deposit Accoun	t Name: Town	send and To	ownsend and Crew LLP		
For the above	identified deposit account, the D	irector is h	ereby authorized to	: (check all tha	at apply)		-	
Charge fe	ee(s) indicated below		Charge	fee(s) indicat	ed below, e	xcept for the filing fee		
✓ under 37 WARNING: Information or information and authoriza		dit card info	Credit a		this form. Pr			
	(All the fees below are due		ing or may be su	bject to a s	urcharge.)		
1. BASIC FILING, S	EARCH, AND EXAMINATION FILING FEES		DOLL 5550	5 14444444				
Application Type	Small Entity Fee (\$) Fee (\$)		RCH FEES Small Entity S) Fee (\$)	EXAMINA Sma	II Entity	S <u>Fees Paid (\$)</u>		
Utility	300 150	500	250	200	100			
Design	200 100	100	50	130	65			
Plant	200 100	300	150	160	80			
Reissue	300 150	500	250	600	300			
Provisional	200 100	0	0	0	0			
Fee Description Each claim over 20 (including Reissues) Each independent claims over 3 (including Reissues) Each independent claims Total Claims Total Claims Extra Claims Extra Claims Extra Claims Fee (\$) Fee Paid (\$) APP = highest number of total claims paid for, if greater than 20 Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) APP = highest number of independent claims paid for, if greater than 3 APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets - 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge):								
SUBMITTED BY							╛	
Signature	f (for		Registration No. Attorney/Agent)	1,405	Telephone	e 650-326-2400	7	
lame (Print/Type) Chu				Date Ju	ıne 2, 2006	+		